



--EXPEDITED PROCEDURE--
RESPONSE UNDER 37 C.F.R. §1.116
GROUP ART UNIT 2882
PATENT
Atty. Docket: NL 000522

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants : VERDONCK et al. Examiner: Church, Craig E.
Serial No. : 09/966,415 Group Art Unit: 2882
Filed : September 28, 2002
For : METHOD AND X-RAY APPARATUS FOR OPTIMALLY IMAGING
ANATOMICAL PARTS OF THE HUMAN ANATOMY

Assistant Commissioner for Patents
BOX AF
Washington, D.C. 20231

AMENDMENT UNDER 37 C.F.R. §1.116

Sir:

In response to a Final Office Action of the U.S. Patent and Trademark Office
mailed on November 5, 2002, please amend the subject application as follows:

IN THE CLAIMS:

Please add the following new claims:

11. (New) A method as claimed in claim 1, further comprising the step of
generating a scanning trajectory prior to the step of acquiring images, and wherein the

CERTIFICATE OF MAILING UNDER 37 C.F.R. §1.8(a)

I hereby certify that this Amendment and any document referred to as enclosed herein is being deposited
with the United States Postal Service as first class mail, postpaid in an envelope, addressed to the Assistant
Commissioner for Patents, BOX AF, Washington, D.C. 20231.

Dated: December 9, 2002

Adrienne Fagan
(Name of Person Mailing Envelope)

Adrienne Fagan
(Signature of Person Mailing Envelope)

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants : Verdonck et al.

Examiner: Church, Craig E.

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ANATOMY

Assistant Commissioner for Patents
Washington, D.C. 20231



AMENDMENT TRANSMITTAL FORM

Sir:

Transmitted herewith is an amendment in the above-identified application.

- [] Small entity status of this application under 37 C.F.R. § 1.9 and 1.27 has been established by a verified statement previously submitted.
- [] A verified statement to establish small entity under 37 C.F.R. § 1.9 and 1.27 is enclosed.
- [X] No additional fee is required.

The fee has been calculated as shown below:

	(Col. 1)		(Col. 2)		(Col. 3)	SMALL ENTITY		OTHER THAN SMALL ENTITY
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR		PRESENT EXTRA	ADDIT. RATE FEE	OR	ADDIT. RATE FEE
TOTAL	13	MINUS	20	=	X 9	\$	X 18	\$ 0
INDEP.	2	MINUS	3	=	X 42	\$	X 84	\$ 0
□ FIRST PRESENTATION OF MULTIPLE DEP. CLAIM						X 135	\$	X 270 \$ 0
						TOTAL	OR TOTAL	\$ 0
						ADDIT. FEE	\$ -0-	

* If the entry in Co. 1 is less than entry in Col. 2, write "0" in Col. 3.

** If the "Highest No. Previously Paid for" IN THIS SPACE is less than 20, enter "20".

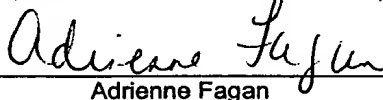
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The Highest No. Previously Paid For (Total or indep.) is the highest number found in the appropriate box in Col. 1 of a prior amendment or the number of claims originally filed.

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Dated: December 9, 2002


Adrienne Fagan

PC DEC 10 2002

☐ Please charge Deposit Account No. 50-2140 in the amount of _____. Two (2) copies of this sheet are enclosed.

☐ A check in the amount of \$_____ is enclosed.

☒ Please charge any deficiency as well as any other fee(s) which may become due under 37 C.F.R. § 1.16 and/or 1.17 at any time during the pendency of this application, or credit any overpayment of such fee(s) to Deposit Account No. 50-2140. Also, in the event any extensions of time for responding are required for the pending application(s), please treat this paper as a petition to extend the time as required and charge Deposit Account No. 50-2140 therefor. TWO (2) COPIES OF THIS SHEET ARE ENCLOSED.

Respectfully submitted,



George Likourezos

Reg. No. 40,067

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DOCKET NO. h1 0005-0 JV. VODO SER. NO. 09/966 4.
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PLEASE DATE STAMP AND RETURN TO
ACKNOWLEDGE RECEIPT OF NOTED DOCUMENTS

Amendment Transmitted in duplicate;

Application	<input type="checkbox"/>	Amendment	<input checked="" type="checkbox"/>
_____ Pages of		Issue Fee	<input type="checkbox"/>
spec., claims & abs.		Notice of Appeal	<input type="checkbox"/>
Con. Doc.	<input type="checkbox"/>	Extension	<input type="checkbox"/>
Drawings	Inf. <input type="checkbox"/>	Mailing Cert	<input checked="" type="checkbox"/>
No. Sh.	For. <input type="checkbox"/>	Assignment	<input type="checkbox"/>
Power of Att.	<input type="checkbox"/>	Decl. - signed	<input type="checkbox"/>
MLG. Date _____		- unsigned ...	<input type="checkbox"/>

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